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FACTS & FIGURES

OF THE HEALTH OF

SOVIET CITIZENS

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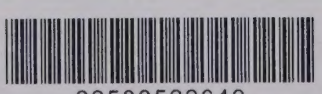
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FACTS AND FIGURES ON THE HEALTH OF SOVIET CITIZENS

"Our country is becoming healthier. It must and will be the healthiest country in the world." G.N.Kaminski, People's Commissar for Health Protection, R.S.F.S.R. 8.2.36.

I. INTRODUCTION:

People are asking how the health of Soviet citizens compares with that of the citizens of other countries; what the socialist construction of the U.S.S.R. means in terms of physical wellbeing to the vast population of the country; how the health services of the Soviet Union compare in extent and efficiency with those of other civilised countries; how the health of the people is cared for by a completely socialised medical service as compared with a partly socialised and partly private service; are the people of the Soviet Union well-nourished, well developed physically?; and many similar questions.

Differences of history, traditions, climate, etc., make it impossible always to compare health conditions in the U.S.S.R. with those in this country directly.

The following facts and figures give various comparisons by which the achievements and standards in the domain of the people's health may be estimated.

- (1). The achievement under Soviet power is measured by comparison with the conditions under Tsarism. It must always be remembered that between 1913 and the first noted Soviet health figures lies a period of ten years' war, war longer and more devastating than that suffered by any other country. We have few figures for this period, but we know that the spread of epidemics and starvation was enormous and the damage done to health incalculable.
- (2). The present standard may be judged by comparisons of disease, death and birth rates in the Soviet Union and this country. In many cases Great Britain with its old established and efficient health service still leads. In some respects, notably children's epidemics and maternal mortality, the Soviet Union is in advance of Great Britain.
- (3). A comparison of the relative rates of development in reducing mortality and disease and improving physique in this country and in the Soviet Union is made. Here the advantage is decidedly with the Soviet Union.
- (4). Similar comparisons may be made with other countries with varying histories, climates, political and economic conditions and traditions. In some of these countries we find deterioration where there has been marked progress in the Soviet Union.

N.B. Figures are given for the whole U.S.S.R. for districts, towns, population groups as they are available for comparison with figures available for other countries. They are not chosen so as to be particularly favourable to the Soviet Union

The statistical machinery of the Soviet Union is improving steadily but the vast area and population and the varying conditions of race, language and climate make it slow work getting out total figures. Unfavourable figures are not suppressed but stressed by the Soviet authorities.

The extent and efficiency of the health services may be judged by the figures given for doctors, medical students, hospital beds, health stations, creches, etc., over a number of years; by the items covered in the Social Insurance budget and by the appreciation of foreign health service experts; notable among these are the members of the League of Nations Health Organisation and the French Minister of Public Health.

II. PHYSICAL DEVELOPMENT:

There is a general tendency for average heights and weights of people of a given age to be greater than those of people of the same age were formerly all over the civilised world. All the reasons for this are not known but food and housing conditions play a part. These increases in height, weight and

chest measurements in part indicate improved well-being. Where they are very marked, they are a strong indication of improved well-being.

Moscow schoolboys of 14 on an average $1\frac{1}{4}$ inches taller in 1930 than in 1923, $3\frac{1}{2}$ inches taller than in 1881.

(Elementary schoolboys in England 1 inch taller on average than those 25 years ago).

Soviet collective farm children weighed $2\frac{1}{4}$ - $4\frac{1}{4}$ lbs. more in 1936 than country children in 1926. Soviet workers' children of 12 - 14 weighed on an average $2\frac{1}{4}$ - $6\frac{1}{2}$ lbs. more in 1935 than did the children of that age in 1913.

(English elementary schoolboys increased in average weight 7 lbs. in 25 years).

Young soviet workers of 21 were on an average 2 - 3 inches taller and $4\frac{1}{2}$ - $6\frac{1}{2}$ lbs. heavier in 1935 than workers of that age of the preceding generation (i.e., 25 years before).

The average Red Army soldier weighs 11 - $13\frac{1}{4}$ lbs. more and is $1\frac{3}{4}$ inches taller than the average soldier of the old Tsarist Army. His chest measurement is 2 inches more. (1936 figures).

(Note that the average height of an unemployed man in England is 3 inches less than that of a student and the average weight 15 lbs. less).

19% - 31% of the recruits to the Red Army Aviation School in 1935 had 1st or 2nd grade 'Ready for Labour and Defence' badges. After one year's service all had 1st grade and 60% - 70% had 2nd grade (more advanced) as well. This badge is given for attainments which mean all round physical fitness. The relation between good nutrition and physical culture on the one hand and the type of physical exercise desirable for the individual's state of health on the other is always stressed by the Soviet health authorities.

III. DEATH RATES:

The general death rate figure means the number of persons dying in a year for every thousand of the population living. The figure for Russia in 1913 was 29.4 (more than twice the English figure - 13.8). The Soviet Union death rate for 1935 was 16; (the English figure for 1934 was 11.8).

The death rate in the Soviet Union has thus declined 44% in 22 years, or really 11 years, i.e., since the civil war. It took England 65 years to achieve an equivalent decline.

The death rate in Soviet Ukraine was 21.2 in 1913 and 12.8 in 1935.

The death rate in Polish Ukraine was 17.1 in 1934.

The population of the Volga German republic, U.S.S.R., is increasing four times as fast as the population of Fascist Germany. Under the Tsars the Volga Germans were thought to be dying out.

The (peace time) death rate in the Tsarist Army in 1913 was 3.97
" " " " " " " " <u>Red Army</u> " <u>1931</u> " 1.83

(Compare death rates in following national armies, 1926:- Czechoslovakia 3.1; Esthonia 5.6; Lithuania 3.5; French 3.4; German 2.7).

Infant Death Rate: This means the number of babies under one year dying per 1,000 born alive. The infant death rate in tsarist Russia was higher than that of any other European country, viz:- 275 in 1913. It is now less than half that figure; in 1935 it was 128. This is still high. In certain workers' settlements better results have been obtained by outstanding health organisation and education. In the Amo and Dynamo factory workers' settlement the infant death rate has been reduced from 210 prior to 1917 to 67 in 1930 - 1932. Reports from collective farms are also satisfactory. In one Northern area over the same period the drop was from 240 to 109. The deaths of infants in the Soviet Union are largely due

to intestinal infections.

(The infant death rate for England and Wales is much lower than that for the whole U.S.S.R. It was 57 in 1935. It has taken 28 years for the rate to be halved. In many industrial districts it is higher.).

IV. BIRTHS:

The decline in the infant death rate has not been accompanied by a decline in the birth rate. This was always high; in 1901, 48 per 1000 of the population. In 1935 it was from 30 to 50 per 1000 according to the district.

(In England the birth rate in 1935 was 14.7. It is declining).

It has been said that the normal ratio of still-births to live births is 45 per 1000. But in the Soviet Union now still-births do not exceed 25 per 1000 live births.

(In England the figure for 1934 was 40).

The high birth rate does not seem to be accompanied by a high maternal mortality, but total figures are not yet available. 3 per 1000 was suggested for Moscow in 1935. The deaths from puerperal fever in Moscow in 1935 were 1.4 per 1000 births and in Leningrad 1.2.

(The corresponding figure in Vienna was 6; in Riga 4.6 and in England 1.61).
Maternal mortality in England, 1935, 3.94 per 1,000 births)

V. EPIDEMICS

Sanitation was notably deficient in tsarist Russia and epidemics connected with bad sanitation ravaged the population. They increased beyond all measure during the war years and have declined so rapidly since that Health Commissar Kaminski's plan to 'liquidate' many of them altogether in the next few years is by no means fantastic.

Below are the case-rates (numbers of persons suffering from the diseases) per 10,000 of the population:-

	1913		1933	1935	1936 (1st $\frac{1}{2}$).
Typhoid	26	(approximately, statistics incomplete)	10		3.3
Dysentery	34	" "	11		

The death rates from these diseases have also declined satisfactorily. The deaths from typhoid fever in Leningrad were 1.1 per 100,000 of the population. (1935 (Compare Warsaw 11 per 100,000, Paris and Rome 4, Bucharest 7, Prague 2, London 0.4)).

The decline in children's epidemics is particularly satisfactory:

	1913		1933	1935
Diphtheria	32		8	6
Scarlet Fever	33		5	15

(Compare the case-rates of scarlet fever and diphtheria in other countries. In England they have increased slightly over the last ten years).

Scarlet Fever:	28	cases per 10,000 in 1935, 37 in 1934, in England and Wales
	22	" " " " " Denmark
	20	" " " " " U.S.A.
	18	" " " " " Germany
Diphtheria:	17	" " " " " England and Wales
	20	" " " " " U.S.A. and Germany
	31	" " " " " Austria
	47	" " " " " France
	65	" " " " " Italy
	69	" " " " " Poland

Smallpox was one of the great scourges of tsarist Russia. Visitors to the Soviet Union will notice many middle-aged people with their faces pock-marked. In 1913 72,000 cases were registered. The registration was notoriously incomplete. In 1929 there were 6079 cases registered. In the first half of 1936 only 200 cases were registered. (The registration of infectious diseases now is highly efficient).

(Compare England and Wales with a population less than one quarter of that of the Soviet Union which had 179 cases of small-pox in 1934; U.S.A. had 2,827 cases in the first quarter of 1936 alone; India registered 88,096 cases in that time).

Malaria was a black spot in Soviet health. Owing to want of foresight when great irrigation and other developments were being carried out under the first Five Year plan, malaria increased from 1930 - 1934. A successful campaign has been instituted. There was a decrease of approximately 1,000,000 cases in 1935 as compared to 1934. The first half of 1936 showed a 30 - 40% reduction of cases as compared to the same period in 1935. There was at the same time a 40% reduction in the death rate.

VI. SOCIAL DISEASES:

Venereal disease reached appalling proportions in tsarist Russia. Total figures are unobtainable owing to the inadequate registration. Insanitary conditions and habits in the remoter parts of the country, the use of a common dish at table, for instance, meant the wholesale propagation of these diseases. Very great improvement is now noted from these districts, the extent of which may be judged from the figures for Kazakstan; -

In 1928 285 cases of V.D. per 10,000 of the population.

In 1935 76 cases " " " " " "

In Moscow 168 cases per 10,000 of the population were registered in 1926; 63 in 1932.

Every measure is taken to make registration complete so that this heritage of tsarism may be eliminated.

Tuberculosis was extremely prevalent in pre-revolutionary Russia. Registration and treatment was totally inadequate. Tuberculosis figures rose everywhere as a result of war conditions, but in Russia the disease assumed incredible proportions. Only death rates can be given and here the earlier figures are no doubt incomplete.

	1913	1931	1935
Moscow: deaths from t.b. per 10,000 of the population	22.6	11.6	9.7
Leningrad: " " " " " " " "	28.6	16.3	15

(The 1934 figure in England and Wales is 7.4. The death rate here has also been about halved since 1913 but, of course, the rise during the war was by no means so great).

The greatest improvement in the incidence of t.b. in the U.S.S.R. is shown, as might be expected, in the young people. In 1928, 38 per 1,000 recruits examined in the Moscow district showed some signs of t.b. In 1935 only 5 had t.b.

VII. REDUCTION OF ILLNESS AND ACCIDENTS AMONG INSURED WORKERS:

All branches of industry report a reduction in the number of cases of illness among the workers. Figures are given for the percentage reduction in certain industries between 1929 and 1934:-

Coal-mining illness reduced by	34.4%
Machine construction " "	22.0%
Textile " "	16.1%
Boot and Shoe " "	36.2%

Numbers of accidents in industry are also being reduced. This is significant since many new workers are being recruited into industry. The Stakhanovite movement, represented in certain quarters as a 'speed-up' has not resulted in increased accidents, but in a decrease. Figures are given for percentage reduction in accidents for certain industries between 1929 and 1934.

Coal-mining accidents reduced by	33.4%
Glass	" " " 43.4%
Tailoring	" " " 74.4%
Engineering	" " " 43.4%

VIII. HOW HAVE THESE RESULTS BEEN OBTAINED?

The extent and organisation of the health services: Only some indication of this can be given.

	1913	1929	1935	1936
Number of qualified physicians:	19,785	63,300	85,900	90,000 (approx).
Number of medical students:	4-5,000		24,000	30,000
Number of hospital orderlies, midwives and other secondary medical personnel in training:	1937 (Plan) 158,000		58,000	89,000
Number of hospital beds:	175,600	246,100	477,600	
Number of dispensaries, clinics, etc. in industrial enterprises:	0	1,942	7,587	

The prophylactic services are of the greatest importance; great development of the following are especially to be noted: creches, kindergartens, children's camps, rest homes, health resorts, sanatoriums, touring, special diets, parks, physical culture institutes, pregnancy and confinement allowances, benefits for young babies. All these benefits now extend to country as well as to industrial workers.

APPRECIATION OF THE HEALTH SERVICES BY FOREIGN EXPERTS:

On July 28th, 1936, the League of Nations Secretariat issued a report from the members of the Hygiene Committee of the League who visited the U.S.S.R. at the invitation of the Health Commissariat. Below are extracts from this report:

After the Bureau's session ended, several members and experts were invited by the Commissar of Public Health to make a tour of the U.S.S.R., thus visiting Leningrad, Gorki, Rostov-on-the-Don, Tiflis, Batoum, Sochi, Yalta, Zaparoje, Kiev, Novorossisk and Sebastopol. They had an opportunity of looking at various aspects of the social medicine and public health problem in this vast country and of seeing how the matter is being treated in the Federation of Republics, the autonomous Republics, municipalities, rural districts and villages, and in the home and the farm.

It appears that as a general rule the proportion of funds allotted to public health in the budgets is as much as 35 per cent.

The problem of free medical attention has been effectively settled. The work done on behalf of women before, during and after child birth is to be noted and also the manner in which the hygiene of maternity has penetrated even as far as the Kolkhose. In many cases the expectant mother can obtain a midwife and come to lie in at the maternity home of which the latter is in charge.

As regards infants: creches and welfare centres are found throughout the country. The 1937 plan provides for a large increase in the number of these centres. This shows the interest taken by the Government in the health of the very young.

The same interest is displayed on behalf of the school child and the adolescent, as is shown by the pioneer camps and the development of physical training in the U.S.S.R.

The interest taken in the health of the worker is no less manifest, as is shown in the growth of a watering place and health resort like Sochi. The huge Sanatoria where treatment is combined with rest and recreation are centres of recuperation which have a most beneficial influence on the capacity for work of the individual.

Special attention was paid by the Health Committee to the subjects which it is already investigating with the help of U.S.S.R. specialists, such as biological standardisation, the anti-malaria campaign, nutrition and housing.

For biological standardisation the Soviet Union has at Moscow an Institute for controlling sera and vaccines, which uses the international standards established by the Health Organisation when testing sera prepared by the many bacteriological institutes within the Union. The output of these institutes is considerable as may be seen from the number of preventive inoculations against typhoid, dysentery, diphtheria and rabies, not to mention smallpox vaccination which is compulsory.

In nutrition the U.S.S.R. has made some interesting innovations. The collective kitchens and factory restaurants with suitable food for the workers whose physical condition is specially in need of such are worthy of attention. The scientific basis for this mass feeding is furnished by the research work of the Institutes of Nutrition, of which the oldest established is in Moscow. A problem which will require further study is that of the food ration in relation to the occupation of the worker. This is a question which is being studied by the International Labour Office and the abundant information collected in the U.S.S.R. will facilitate the work.

The example of Moscow is sufficient to show the importance attached in the Union to town planning and housing. Factories, houses and flats have been built in large numbers. Arterial roads have been pierced. A further plan of extension has been drawn up, providing for additional buildings and underground lines. The League's Health Organisation will be able to benefit from the help of the U.S.S.R. architects, engineers and health experts in the study of various problems of urban housing.

Now that hygiene is becoming a more and more important factor in rural life, thanks to the action of the kolkhoses, the whole question of making housing conform to the laws of health arises. This is a matter in which the assistance of the health specialists and sanitary engineers of the U.S.S.R., with the experience they have acquired, will be of value to the Health Organisation.

M. Henri Sellier, French Minister of Health, visited the Soviet Union in September, 1936. Below are some of his appreciations:-

"I knew that great constructive work was in progress, led by the indomitable energy of Stalin and his associates. Statistical data testified to daily successes yet it seemed to me that there was still great destitution, that the Russian workers and peasants would still have to cover a long road to reach the material standard of the Western countries.

"I was profoundly mistaken. While I do not presume, like many visitors to your country, to speak with the tone of a doctor on the material conditions of the workers whose traditions and customs are so different from those of the Western proletariat, I can at least testify to facts.

"Sanitary organization in the U.S.S.R., in town and village, the whole system of prophylactic institutions, is distinctly on a higher level than corresponding institutions in France and in most European countries. The associates of Kaminsky, the Commissar of Health, have transformed a people unacquainted with hygiene, eaten by parasites, suffering from contagious diseases, rotting from prostitution, into a clean and healthy nation which devotes so much attention to physical culture and hygiene. The louse cannot live in the U.S.S.R., typhus is gone.

"No country in the whole world has such magnificent establishments for the protection of motherhood and childhood. Ten years ago Russia held one of the first places in the sad list of countries with a high rate of infantile mortality. To-day Russia is far ahead of France in the roll of honor, in line with the countries known for a high level of sanitary conditions."

In September, 1936, Dr. Marteau, member of the Belgian Chamber of Deputies

and director of a clinic, related his impressions of the Soviet Union to a TASS representative:-

"This is my fourth visit to the Soviet Union," he said, "and on each new visit I can see the progress made in all branches of the life of the country.

"As a doctor and as a man who has visited many countries, I can say from my own personal experience that in no country have I seen such a large system of prophylactic institutions as in the U.S.S.R. I have in mind sanatoriums, nurseries, institutions for the welfare of mother and child, and so on. Of course, one can find excellently organized medical institutions in other countries, too. But nowhere is the protection of the health of the wide masses catered to on such a wide scale as in the Soviet Union. I have been convinced of this on visiting the Far East, Siberia, the Urals, Ukraine, Leningrad and Moscow."

1945. excluders still included. but all live born children [D]

1946. ex-nuptial children previous issue by Mr & Mrs [D]
are included but children by second marriage are
not are still born. [D]

N2. living legitimate births only - existing marriage only [D]

Summary: legitimate births only. living & present marriage
still births included (also duration of marriage) [D]